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SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT		ATTORNEY DOCKETT NO.
08/238,405 05/05/94		i/94 CAPON	D	CELL5.3
SARALYNN MANDEL CELL GENESYS, INC. 322 LAKESIDE DRIVE FOSTER CITY, CA 94404		18N2/0425	ALLEN, M	EXAMINER
			ART UNIT	PAPER NUMBER
			1812	8
		EXAMINER INTERVIEW SUMMARY F	DATE MAILED: RECORD	04/25/95
All participants (applicat	nt, applicant's represent	ative, PTO personnel):		·
(1) Saralyne	, Mandel	(3)		
(2) Marianne	Allen	(3)		
Date of interview	4/19 195			
Claims discussed:	Ached with respect to sol	me or all of the claims in question. 🗹 was not re		
Description of the gene	ral nature of what was a shiedlor un	greed to if an agreement was reached, or any oth as available for action and action actions.	er comments: Infe	acted on
attached. Also, where	no copy of the amendme	the amendments, if available, which the examine ents which would render the claims allowable is av de a separate record of the substance of the inter	ailable, a summary there	e claims allowable must be of must be attached.)
WAIVED AND MUST II	NCLUDE THE SUBSTAN	to Indicate to the contrary, A FORMAL WRITTEN NCE OF THE INTERVIEW (e.g., items 1-7 on the given one month from this interview date to provid	reverse side of this form)	. If a response to the last Office
requirements t response requ	hat may be present in th	ry above (Including any attachments) reflects a cone last Office action, and since the claims are now be action. Applicant is not relieved from providing	allowable, this complete a separate record of the	d form is considered to fulfill the substance of the interview unles
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Examiner's Signature